EXHIBIT 32

IN THE UNITED STATES DISTRICT COURT
DISTRICT OF MINNESOTA

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IN THE MATTER OF	)
	)
IN RE BAIR HUGGER FORCED AIR WARMING PRODUCTS LIABILITY LITIGATION	)
	)
Plaintiff,	)
	)PRETRIAL ORDER NO: 7
v.	)Protective Order
	)MDL No. 15-2666
3M COMPANY AND ARIZANT HEALTHCARE INC.	)(JNE/FLN)
	)
Defendant.	)

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DEPOSITION OF PAUL MCGOVERN
VOLUME II
Thursday, January 5, 2017
AT: FAEGRE BAKER DANIELS LLP
Taken at:
7 Pilgrim Street
London EC4V 6LB
United Kingdom

Court Reporter:
Louise Pepper: Accredited Real-time Reporter
Videographer: Simon Addinsell

JOB NO. 117121

DR. PAUL MCGOVERN

MR. C. GORDON: What was the last number you had?

MR. SACCHET: Yes, cell number 44.

MR. C. GORDON: 44?

MR. SACCHET: Yes.

THE WITNESS: Row number.

MR. SACCHET: Oh, I apologize. 44C, labeled "FAW".

MR. C. GORDON: From September 15?

BY MR. SACCHET:

Q. Labeled "FAW". If we could now look at the cells 43, 45 and 46, what is their label in the BC column?

A. "CFW".

Q. How many total CFW infections is that?

A. 3.

Q. So there are 32 forced-air warming infections and 3 conductive fabric warming infections; correct?

A. Yes.

Q. If we turn back to the McGovern study, exhibit 13, and look back to table 2.

A. Yes.

Q. Are there three conductive fabric warming related infections?

A. Indeed there are.

Q. Are there 32 forced-air warming related infections?

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A. Yes.

Q. Does the data presented in this Excel spreadsheet match the data presented in the published study?

A. The data we've discussed matches the data in the published study.

Q. Now let's look at the significance of the data. Table 2 shows a P value of 0.024 with respect to patient warming device; correct?

A. Yes.

Q. A P value of 0.024 is statistically significant, is it not?

A. Yes.

Q. That would indicate that there was a sufficiently powered difference between infection rates in patients who received conductive fabric warming devices versus those who received forced-air warming devices; correct?

A. That is what this analysis would suggest, yes.

Q. Table 2 also bears the number 3.8 under "Odds ratio"; do you see that?

A. Yes, yes.

Q. What does that number signify?

A. I am not happy to define that at the moment, because I may make a mistake.

Q. Does it relate to, on the first page of the study,

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in the line that I previously read, which is in bold in the third paragraph, where it states "A significant increase in deep joint infections as demonstrated by an elevated infection odds ratio of 3.8 was identified during a period when forced-air warming was used compared to a period when conductive fabric warming was used"?

A. That is what this refers to.

Q. So there was a 3.8 times more likely rate that a patient would incur a deep joint infection with the use of a forced-air warming device than with a conductive fabric warming device; correct?

A. That is what I understand from these data and from this analysis.

Q. Do you recall Mr. Reed informing you that "The data was dramatic and will demonstrate to reviewers that there was a genuine change with conductive fabric warming rather than a steady decline due to other reasons"?

A. I don't recall him saying that.

(Exhibit 17 marked for identification)

Q. If I could direct your attention to page 2 of 3. There is an e-mail dated February 19, 2011, from Mike Reed to Mr. Albrecht and yourself and Mr. Belani and Mr. Nacthsheim; correct?

A. Yes.

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Q. The final two lines of the large paragraph in the middle of the page states:

"It is quite dramatic and will demonstrate to reviewers that there was a genuine change with CFW rather than a steady decline due to other reasons."

Do you see that?

A. That is what it says here, yes.

Q. Does that refresh your recollection that Mr. Reed stated that the data showed a genuine change with conductive fabric warming, rather than a steady decline due to other reasons?

A. It does refresh my memory to that effect.

Q. Do you have any reason to doubt Mr. Reed's ability to make such a statement?

A. I do not.

Q. You have all the confidence that you could that Mr. Reed would accurately state such a statement?

A. Yes.

Q. Do you recall the reviewers from the Journal of Bone and Joint Surgery stating that there were -- that the data in your study supported serious issues with forced-air warming devices?

A. I don't recall their comments to that effect.

(Exhibit 18 marked for identification)

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objection, please.
MR. C. GORDON: Form.
A. That is what this data appears to show.
BY MR. SACCHET:
Q. So this data shows there is a 3.6 times increase in infection as a result of using forced-air warming devices compared to conductive fabric warming devices; correct?
A. That is what --
MR. C. GORDON: Object to the form of the question.
A. That is what this table appears to show.
BY MR. SACCHET:
Q. And both this odds ratio and the odds ratio presented in the final published McGovern study are both above 3.0; correct?
A. Yes.
Q. So, based on this data in the increased patient population of those who received conductive fabric warming, this data corroborates the fact that there is at least a three times more likely chance that patients who received forced-air warming developed an infection, compared to those who received conductive fabric warming?
MR. C. GORDON: Object to the form of the question.

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A. This data -- I can't agree with the term "corroborates the fact". The fact is not --
BY MR. SACCHET:
Q. Also shows?
A. Yeah. Could you just repeat the phrase, please, or rephrase that? Or --
Q. I'll rephrase the question.
Based on the data presented in this table and the data presented in the McGovern study, both studies for both datasets show that there was a three -- at least a three times more likely chance that a patient developed an infection after using forced-air warming than conductive fabric warming?
MR. C. GORDON: Object to the form of the question.
A. Yes. Patients who were in the group with forced-air warming on this data appear to have had a three times or more higher incidence of infection compared to the conductive fabric group of patients for this study.
THE COURT REPORTER: Can I just ask you to stop for 30 seconds, sorry.
THE VIDEOGRAPHER: Going off at two minutes past three.
(3:02 p.m.)

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(Break taken.)
(3:04 p.m.)
THE VIDEOGRAPHER: Back on the record at four minutes past three.
(Exhibit 24 marked for identification)
BY MR. SACCHET:
Q. Mr. McGovern, are you aware of any data that's been collected regarding other healthcare facilities that have shown a decreased rate of infection after the switch from forced-air warming devices to conductive fabric warming devices?
A. I am not.
Q. If you could take a look at the exhibit which was just marked. The first page is an e-mail; is that correct?
A. Yes.
Q. From Mr. Albrecht to Scott Augustine, bearing the subject line "Results" with attachments "MA_edits"; correct?
A. Yes.
Q. And Mark Albrecht states:
"I've updated the statistics in the white paper under **MA_edits.doc**."
A. Yes.
Q. "The updates include:
"The statistics in the Table for all centers and

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the pooled result[s]
"The statistics in the discussion for the updated McGovern numbers provided as provided [sic] in the text."
Do you see that?
A. Yes.
Q. In the third paragraph it says:
"I think this is the best modeling approach (i.e. a conservative one) for the data you have, especially if you expect these results to be critically questioned down the road."
Do you see that?
A. Yes.
Q. Okay. And the next page is a document entitled "Forced-air warming link to periprosthetic total joint replacement infections"; correct?
A. Yes.
Q. And the "Methods" says:
"To investigate whether the rising contaminants from the waste FAW heat are linked to PJIs, we retrospectively collected joint implant infection data from three hospitals. We compared PJI rates during a period of forced-air warming to PJI rates during a period of free-air conductive fabric